

1 LOCATION OF WATER WELL:		Fraction <u>CENTER</u> <u>1/4</u> <u>N 1/2</u> <u>1/4</u> <u>SE</u> <u>1/4</u>		Section Number <u>25</u>		Township Number <u>T 29</u> <u>S</u>		Range Number <u>R 9</u> <u>EW</u>	
County: <u>Kingman</u>									
Distance and direction from nearest town or city street address of well if located within city? <u>3 North, 2 East, 3/8 North, 1/2 West of Zenda, Ks.</u>									
2 WATER WELL OWNER:		<u>H-30 Drilling Company</u>							
RR#, St. Address, Box # :		<u>251 N. Water Suite 10</u>							
City, State, ZIP Code :		<u>Wichita, Kansas 67202</u> Lease: <u>Magill # 1</u>							
		Board of Agriculture, Division of Water Resources Application Number: _____							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>58'</u> ft. ELEVATION: _____							
		Depth(s) Groundwater Encountered 1. <u>29'</u> ft. 2. _____ ft. 3. <u>24 June 85</u> ft.							
		WELL'S STATIC WATER LEVEL <u>29'</u> ft. below land surface measured on mo/day/yr <u>24 June 85</u>							
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Est. Yield <u>40</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter <u>10</u> in. to <u>58</u> ft., and _____ in. to _____ ft.							
		WELL WATER TO BE USED AS:							
		1 Domestic 3 Feedlot <u>6</u> Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)							
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____							
		Water Well Disinfected? Yes <u>X</u> No _____							
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped _____							
1 Steel		5 Wrought iron							
3 RMP (SR)		6 Asbestos-Cement							
<u>2</u> PVC		9 Other (specify below)							
4 ABS		Welded _____							
		7 Fiberglass							
		Threaded _____							
Blank casing diameter <u>5</u> in. to <u>38</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface <u>12</u> in., weight <u>2.34</u> lbs./ft. Wall thickness or gauge No. <u>.214</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>7</u> PVC							
1 Steel		10 Asbestos-cement							
3 Stainless steel		8 RMP (SR)							
5 Fiberglass		11 Other (specify) _____							
2 Brass		12 None used (open hole)							
4 Galvanized steel		6 Concrete tile							
9 ABS									
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped							
1 Continuous slot		<u>8</u> Saw cut							
3 Mill slot		11 None (open hole)							
2 Louvered shutter		6 Wire wrapped							
4 Key punched		9 Drilled holes							
		7 Torch cut							
		10 Other (specify) _____							
SCREEN-PERFORATED INTERVALS:		From <u>38</u> ft. to <u>58</u> ft., From _____ ft. to _____ ft.							
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
GRAVEL PACK INTERVALS:		From <u>10</u> ft. to <u>58</u> ft., From _____ ft. to _____ ft.							
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
6 GROUT MATERIAL:		1 Neat cement							
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From <u>2</u> Cement grout		3 Bentonite							
		4 Other _____							
What is the nearest source of possible contamination:		10 Livestock pens							
1 Septic tank		14 Abandoned water well							
4 Lateral lines		11 Fuel storage							
7 Pit privy		15 Oil well/Gas well							
2 Sewer lines		12 Fertilizer storage							
5 Cess pool		16 Other (specify below)							
8 Sewage lagoon		<u>None</u>							
3 Watertight sewer lines		13 Insecticide storage							
6 Seepage pit									
9 Feedyard									
Direction from well?		How many feet?							
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG			
0	2	Soil, top							
2	12	Clay, tan and red							
12	30	Sand, fine to coarse and fine to med gravel							
30	36	Clay, red							
36	55	Sand, fine to coarse and fine gravel							
55	58	Shale, red							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>24 June 85</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>325</u> This Water Well Record was completed on (mo/day/yr) <u>19 Aug 85</u> under the business name of <u>Central Well & Pump, Inc.</u> by (signature) <u>[Signature]</u>									
INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									